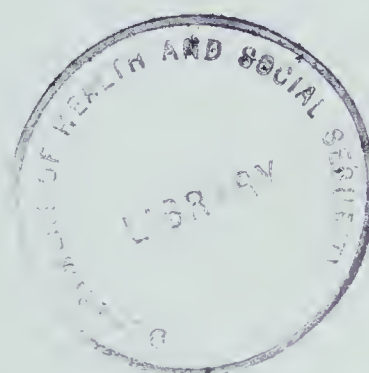


URBAN DISTRICT OF ROTHWELL

**ANNUAL REPORT**  
**1968**



MEDICAL OFFICER OF HEALTH AND  
CHIEF PUBLIC HEALTH INSPECTOR



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CHIEF PUBLIC HEALTH INSPECTOR



## ROTHWELL URBAN DISTRICT COUNCIL

*Chairman of Council :*

Councillor E. Hemingway

*Vice-Chairman :*

Councillor Mrs. A. M. Waring

Public Health Committee :

Chairman : C.Councillor A. Wright

Vice-Chairman : C.Councillor Mrs. D. Hardwick

Councillor F. Ashton

„ J. Bolstridge  
„ P. Burrows  
„ Mrs. De Carteret  
„ E. Hemingway  
„ Mrs. L. Haywood  
„ Mrs. R. A. Moss  
„ Miss E. Rudd

Medical Officer of Health :

W. Duncan Dolton

Chief Public Health Inspector :

G. F. Idle

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# ANNUAL REPORT

## of the

### DIVISIONAL MEDICAL OFFICER OF HEALTH

#### 1968

*To the Chairman and Councillors.*

This, my third, Annual Report, again falls into two sections. In the first I comment on those health matters of particular interest to the Council administered by the West Riding County Council. The second part of the report is that of the Chief Public Health Inspector, and relates to the sanitary circumstances of the District.

During 1968 there were a number of changes in the administration of the personal health services. From the first day of the New Year, all children born within the area were recorded on a computer file at County Headquarters. Later in the year the computer began to send out to the parents invitations to have their child immunised, either by the Family Doctor or Local Health Authority. Later in the year the computer was also used to see that all children within the Division had their hearing tested at about 9 months of age.

A complete review was undertaken of the Child Welfare Clinics and Health Visitors' case loads. Following this a number of Clinics were closed and others were held less frequently. I hoped to be able to withdraw Doctors from these Clinics the Health Visitor undertaking immunisations and giving advice about the well babies. There is no question that sick children should be seen by the family doctors. In practice all Clinics have been visited, from time to time, by a Doctor, but many are now staffed most of the time by a Health Visitor and helper. These administrative re-arrangements were made on the grounds of efficiency rather than economy. Clinic Doctors should not duplicate the work of the family doctor, and towards the close of the year plans were being drawn up for Clinic Doctors to see children, by appointment only, for regular assessment of developmental progress — a plan in the best traditions of preventive medicine and a service not yet undertaken by most family doctors. The review of Health Visitors' work disclosed that most were responsible for populations in excess of 5,000 with between four to six hundred pre-school children, for which of course they are directly responsible. The Health Visitors' areas were adjusted and attachments to family doctor practices made whenever possible.

At the end of the previous year, routine school medical examinations had given place to selective examinations, while all children received a pre-school medical at about the age of

4½. These arrangements worked well during the year and allowed school nurses and doctors to concentrate, during visits to schools, on those children with special needs.

Health Education has been a priority topic during the year. Study Groups of Field Workers have met to discuss how best health education may be given to the school child, the expectant and new mother, and the aged. There is now a library of health education material — booklets, leaflets, articles, film strips, at the Garforth Health Centre — for use within the Division. Health Education continues, of course, to be a vital part of the Public Health Inspector's work in advising food traders, householders and the general public on general hygiene.

At the turn of the century Parliament expressed the concern of the public for the then under-privileged children of our nation by setting up the School Health Service. Only very recently has our attention turned to the unmet needs of the under 5's. Your Medical Officer feels that it is time that a service, similar to the School Health Service, was established for those past retiring age. While many school children and many at 70 years are fit, there are some who would, and do, benefit from a medical inspection. Simple defects of hearing and vision can be remedied and add much to the enjoyment of life. Some degenerative conditions can be arrested, or appliances, such as walking aids, provided to make life more tolerable. During 1968 two family doctors within the Division have held regular Clinics for retired folk within the Practice — one in a Local Authority Clinic and the other in the doctor's own surgery. Both have been a success, both in terms of patient satisfaction and the saving of the family doctor's time. I hope that this service will extend in the future.

In previous reports I have refrained from more than general comments on the environmental health of the urban and rural districts which make up the Division. I feel, however, that at this moment of time, when the future of the Medical Officer of Health is uncertain, and indeed, the need for the post debated, that I should place on record some of the environmental problems seen during 1968, without stating specifically which district was involved.

Even to-day the quality of both private and public water supplies leaves something to be desired. On my desk, as I write, are four consecutive water samples in which the type 1 B. Coli counts are 180+, 90, 160, 160 per 100 ml. These were private farm supplies which have long been known to be unsatisfactory from time to time. Unsatisfactory samples of public water supply from another district disclosed that birds had ready access to a water storage tank. The possibility of contamination, not only by bacteria, but pesticides and agricultural chemicals



from surrounding agricultural land, is cause for concern. Turning to the disposal of waste water, the situation is little more satisfactory. Many householders in several districts are periodically subjected to the unpleasantness of sewage discharged over their land. As sewers overflow with storm water, or carry a greater volume than that for which they were designed many years ago, sewage backs up through manhole covers.

It is worthy of comment that while loan sanction has been granted for one large sewage improvement scheme to serve a rapidly expanding urban area, permission has not been granted for the installation of even the most primitive Sewage Works in some rural villages. As I write, some rural streams are nothing more than open sewers. While this may be of little hazard to health, it is unpleasant, and in one case wells for drinking water are situated not far from such a polluted beck.

Animal excreta can of course be as potentially hazardous as that from human beings. In one market town cattle trucks, bringing the animals to market, are hosed down on a hard standing by the public highway. On the days of the cattle market, animal waste products cover the pavement and highway and are transported on boots and shoes to nearby cafés and public houses. It is most gratifying to record that this situation will shortly cease, but even so one cannot be happy when one considers the close proximity of the cattle market to food shops and dwelling houses. The distance can present no barrier to flies and other insects capable of carrying animal diseases to the general population.

During the year dysentery, which one regrets to have to record is now endemic in the area, became epidemic on two occasions. The most impressive thing was how powerless we seem to be in the control of this all too common illness. Cases of food poisoning occur from time to time, but a full scale investigation of a meat processing factory within the area was undertaken during the summer, following the death of a Leeds resident from a salmonella stanley infection. Eleven other people were involved, all of whom had eaten the meat products of this factory. Investigation disclosed poor factory layout, with opportunities of contamination of unprocessed, uncooked and cooked products, and also poor personnel management, in that some of the staff had little appreciation of the necessity for clean food handling.

The importance of cleanliness in commercial food establishments cannot be over-stressed. During the year successful action was taken against one hotel management in respect of the appalling hygiene conditions in the kitchen. In general I continue to be astonished at the apparent public indifference and tolerance of poor standards of hygiene in the food retail trade, and indeed in the ordinary home.

The Division contains a number of potentially hazardous industries, perhaps that most frequently complained of by local residents being a Lead Works. By the very nature of the process unpleasant fumes are emitted, and a certain amount of lead is inevitably discharged into the atmosphere. Indeed, lead levels of over 20,000 parts per million are recoverable from the public highway near the Works. It is a matter of concern to the Medical Officer of Health that the responsibility for the individual health of workers is that of the appointed factory doctor, and that nobody is obliged to report cases of lead poisoning to the Medical Officer. From the point of view of the Chief Public Health Inspector the situation is equally unsatisfactory, as some aspects of factory control lie with the Alkali Inspectorate and others with the Factory Inspectorate. While no cases of lead poisoning are known to have occurred in the public, cases do occur from time to time among the workers.

While appreciating that the Districts are Housing Authorities but not Welfare Authorities, I have been dismayed, from time to time, by the eviction of unsatisfactory tenants. Plainly, even the "problem family" must live somewhere and eviction solves no problems in the long term.

I am pleased to record that, during the year under review, arrangements have been made with the Housing Managers with regard to seeking medical support for rehousing. For the first time there has been a system for a medical inspection and report. It must be stressed that when I do not support, on medical grounds, an application for housing, this does not prejudice the individual's chances and when his application is supported this is not intended, in any way, to force the Committee to allocate a council house. Relations with the Housing Department have been cordial and are becoming steadily closer, and an understanding of each other's problems steadily deeper.

Housing, of course, continues to exert a most profound influence, not only on the life of the individual, but on his happiness.

It is a pleasure to record a year of loyal and conscientious work from the many people who work in the Divisional Offices, in the District Health Departments, and perhaps most important of all, in people's own homes. The many changes have been suffered with good humour and enthusiasm. I thank too the Health Committee for its interested support and guidance during the year.

W. Duncan Dolton,  
*Medical Officer of Health.*

Summer 1969.



**TABLE 1**  
**PRINCIPAL VITAL STATISTICS FOR THE YEAR 1968**

	Garforth Urban District	Rothwell Urban District	Stanley Urban District	Tadcaster Rural District	Wetherby Rural District	Divisional Totals
Population (Mid-year 1968)	20,720	27,540	19,410	33,170	29,790	130,630
Live Births:						
Total	543	426	353	618	418	2,358
Legitimate	524	402	338	591	400	2,255
Illegitimate	19 (3.5%)	24 (6.8%)	15 (4.2%)	27 (4.4%)	18 (4.3%)	103 (4.4%)
Stillbirths	4	5	13	4	3	29
Deaths of Infants:						
Legitimate	11	7	5	9	6	38
Illegitimate	—	1	—	2	—	3
Under one week	8	5	3	5	4	25
Under four weeks	8	5	4	5	4	26
Total — under one year	11	8	5	11	6	41
Deaths (All causes)	183	401	181	351	247	1,363

**CRUDE AND ADJUSTED RATES**

Live Births	26.2	15.5	18.2	18.6	14.0	18.1
Live Births (Adjusted)	23.6	15.8	18.0	18.6	15.0	—
Illegitimate Births per 1000 live births	35.0	68.0	42.5	43.7	43.1	43.6
Deaths (All causes)	8.8	14.6	9.3	10.6	8.3	10.4
Deaths (Adjusted)	12.9	10.9	11.1	12.3	10.5	—
Maternal Mortality	—	2.32	—	—	—	0.42
Stillbirths	7.3	11.6	35.5	6.4	7.1	12.1
Perinatal Mortality	21.9	23.2	43.7	14.5	16.6	22.6
Neo-natal Mortality	14.7	11.7	11.3	8.1	9.6	11.0
Early Neo-Natal Mortality (under 1 week)	14.7	11.7	8.5	8.1	9.6	10.6
Infant Mortality:						
All infants per 1000 live births	20.3	18.8	14.2	17.8	14.4	17.4
Legitimate infants per 1000 legitimate live births	21.0	17.4	14.8	15.1	15.0	16.8
Illegitimate infants per 1000 illegitimate live births	0.0	41.7	0.0	74.0	0.0	29.1
Tuberculosis — respiratory	—	—	—	—	—	—
Tuberculosis — other	—	—	—	0.03	—	0.01
Tuberculosis all forms	—	—	—	0.03	—	0.01
Cancer (all forms)	1.74	2.25	1.49	2.11	1.88	1.94
Vascular lesions of the nervous system	0.97	3.59	1.18	1.30	1.31	1.71
Heart and Circulatory Disease	3.57	4.32	3.61	3.68	2.45	3.51
Respiratory	1.11	2.29	1.55	1.66	1.31	1.61
Comparability Factors:						
Births	0.90	1.02	0.99	1.00	1.07	—
Deaths	1.46	0.75	1.19	1.16	1.27	—

All the maternal mortality stillbirth and peri-natal mortality rates are per 1000 live and stillbirths.

## Divisional Vital Statistics

The National Birth Rate continues to fall year by year, being 17.7 per thousand inhabitants in 1966, 17.2 in 1967 and 16.9 in the year under review. The Divisional Birth Rate, while higher than the National average, has fallen from 18.9 in 1967 to 18.1. Even when adjusted for the average age of the population, there are considerable differences between the five districts comprising the Division (See Table 1), ranging from a rate of 23.6 in Garforth to 15.0 in Wetherby.

TABLE 2  
RECORD OF DEATHS IN AGE GROUPS 1968

	GARFORTH URBAN DISTRICT			ROTHWELL URBAN DISTRICT			STANLEY URBAN DISTRICT			TADCASTER RURAL DISTRICT			WETHERBY RURAL DISTRICT		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total
Under 1 year ..	6	5	11	6	2	8	2	3	5	8	3	11	2	4	6
1—4 years ..	-	-	-	1	-	1	-	-	-	2	-	2	1	1	2
5—14 years ..	-	1	1	1	2	3	-	1	1	1	-	1	2	-	2
15—24 years ..	2	-	2	4	-	4	2	-	2	2	2	4	2	-	2
25—34 years ..	-	-	-	3	1	4	3	3	6	2	-	2	2	3	5
35—44 years ..	2	1	3	7	6	13	4	3	7	9	7	16	4	1	5
45—54 years ..	6	5	11	15	5	20	4	5	9	15	8	23	12	11	23
55—64 years ..	22	11	33	34	21	55	13	15	28	35	22	57	25	12	37
65—74 years ..	36	21	57	55	55	110	34	18	52	64	40	104	34	29	63
75 and over ..	29	36	65	67	116	183	21	50	71	56	75	131	40	62	102
	103	80	183	193	208	401	83	98	181	194	157	351	124	123	247

The National Death Rate has been almost unchanged for many years. For 1968 it was 11.9 per 1,000 inhabitants, the Divisional Rate for the same year was 10.4. The high crude rate for Rothwell was almost certainly due to the excess of elderly folk who find their last home in St. George's Hospital, most of whom were previously resident outside the area. The adjusted rates of the five districts are all close to the National average.

The ages of death are shown in Table 2. The pattern calls for very little comment. The years between the first and thirty-fifth birthdays are now very safe for both males and females.

The causes of death are shown in Table 3.

**TABLE 3**  
**CAUSES OF DEATH, 1968**

	GARFORTH URBAN DISTRICT		ROTHWELL URBAN DISTRICT		STANLEY URBAN DISTRICT		TADCASTER RURAL DISTRICT		WETHERBY RURAL DISTRICT	
	M	F	M	F	M	F	M	F	M	F
Enteritis and other diarrhoeal diseases ..	1	—	1	—	—	—	2	—	—	—
Other Tuberculosis, incl. late effects ..	—	—	—	—	—	—	1	—	—	—
Measles ..	—	1	—	—	—	—	—	—	—	—
Other infective and parasitic diseases ..	—	—	2	—	—	—	—	1	—	2
Malignant Neoplasm:										
Stomach ..	1	1	5	1	1	1	4	4	—	3
Lung, bronchus ..	8	2	13	3	5	—	11	3	12	7
Breast ..	—	2	—	6	—	3	—	6	—	6
Uterus ..	—	2	—	1	—	—	—	2	—	2
Leukaemia ..	—	2	1	1	—	—	1	1	3	—
Other malignant neoplasms, etc. ..	8	10	18	13	7	12	22	16	13	10
Benign and unspecified neoplasms ..	—	—	1	1	—	—	—	—	—	—
Diabetes mellitus ..	—	1	—	—	—	—	1	2	2	—
Other endocrine etc., diseases ..	—	—	—	—	—	—	—	—	2	—
Anaemias ..	—	—	—	—	—	1	—	—	1	—
Other diseases of blood, etc. ..	—	—	—	—	—	—	—	2	—	—
Mental disorders ..	—	—	1	3	—	—	1	—	—	—
Other diseases of nervous system, etc. ..	1	—	4	—	1	3	3	1	1	1
Chronic rheumatic heart disease ..	3	1	2	1	1	3	1	—	—	2
Hypertensive disease ..	3	2	2	1	2	1	3	3	3	1
Ischaemic heart disease ..	28	15	40	34	25	19	58	33	29	25
Other forms of heart disease ..	5	5	9	17	3	10	7	9	1	3
Cerebrovascular disease ..	7	13	26	73	10	13	20	23	18	21
Other diseases of circulatory system ..	8	4	7	6	2	4	3	5	6	3
Influenza ..	1	—	—	1	—	—	—	1	—	—
Pneumonia ..	5	4	17	16	6	4	16	17	7	14
Bronchitis and emphysema ..	8	2	21	7	7	10	14	4	10	6
Asthma ..	—	1	—	—	—	—	—	1	—	—
Other diseases of respiratory system ..	1	1	—	1	2	1	1	1	—	2
Peptic ulcer ..	2	—	4	—	3	—	2	—	2	—
Appendicitis ..	—	1	—	—	—	1	—	—	—	1
Intestinal obstruction and hernia ..	—	—	—	1	—	—	—	—	—	—
Cirrhosis of the liver ..	1	1	—	1	—	—	—	—	—	—
Other diseases of the digestive system ..	—	3	1	6	—	1	3	2	—	—
Carried forward ..	91	74	175	194	75	87	174	137	110	109



TABLE 3—continued

CAUSES OF DEATH, 1968	GARFORTH URBAN DISTRICT		ROTHWELL URBAN DISTRICT		STANLEY URBAN DISTRICT		TADCASTER RURAL DISTRICT		WETHERBY RURAL DISTRICT	
	M	F	M	F	M	F	M	F	M	F
Brought forward ..	91	74	175	194	75	87	174	137	110	109
Nephritis and Nephrosis ..	1	—	—	1	—	—	1	1	2	—
Hyperplasia of prostate..	—	—	—	—	—	—	—	—	1	—
Other diseases, genito- urinary system ..	1	—	1	4	—	3	1	1	—	1
Other complications of pregnancy, etc. ..	—	—	—	1	—	—	—	—	—	—
Diseases of skin, sub- cutaneous tissue ..	—	—	—	1	—	—	—	—	—	—
Diseases of musculo- skeletal system ..	—	—	—	1	—	1	—	—	—	—
Congenital anomalies ..	1	2	2	1	—	3	3	2	1	2
Birth injury, difficult labour, etc. ..	1	—	1	1	1	—	1	1	—	2
Other causes of perinatal mortality ..	3	2	3	—	1	—	1	1	—	1
Symptoms and ill- defined conditions ..	—	—	—	—	—	2	1	4	—	2
Motor vehicle accidents ..	2	1	6	1	3	—	5	2	3	1
All other accidents ..	2	—	3	2	2	2	7	6	5	3
Suicide and self- inflicted injuries ..	1	—	1	—	1	—	—	2	2	1
All other external causes..	—	1	1	1	—	—	—	—	—	1
TOTALS ..	103	80	193	208	83	98	194	157	124	123

Of the 1,363 deaths in the Division 682 were due to diseases of the heart or circulatory system, 244 to various types of cancer and 210 to diseases of the respiratory tract. About half the deaths from heart disease were due to the now familiar "coronary." 244 were certified as due to cerebro-vascular disease, more commonly known as "a stroke." Each of these fatal but non-infectious diseases killed more people than all the diseases of the respiratory system put together. Indeed, such has been the decline in the importance of pneumonia (106 deaths in the year under review) that it ceased to be notifiable during the year.

Of the 244 deaths from cancer 64 were from cancer of the lung, this is an increase of 16 from 1967, equally divided between males and females. This, of course, means that proportionately there has been a great increase in deaths from lung cancer in women (7 in 1967, 15 in 1968). Epidemiologists have long since forecast an increase in deaths of women from this cause, following the widespread use of cigarettes in the Women's Armed Forces in the 1939-45 war.

While there were 7 deaths from cancer of the womb there were 23 from cancer of the breast. This emphasizes the need of self examination of the breast as a life saving measure. Cervical Cytology is, of course, available to detect early cancer of the neck of the womb. Since this service was offered to women in this Division in 1966, 8 have had the womb removed for malignancy. It would not be unfair to claim that this represents 8 lives saved.

There were 24 deaths from motor accidents during the year, an increase of 5 from 1967. Again, 8 people took their own lives during the year. Even the most optimistic would agree that life can become an intolerable burden at times. Sadly it seems that many folk in this position continue to suffer bravely and uncomplainingly to the end. Those who take their own lives are often, if not always, mentally disturbed. To them life may seem intolerable, while to the outsider there is still much to live for. These people need help. They must be encouraged to discuss their problems with a Mental Welfare Officer, or other skilled Worker, as soon as there is any hint of suicidal tendencies. Unfortunately it is not true that those who threaten suicide never take their own lives.

Table 4 shows that 41 children died in the first year of life — that is 17.4 per thousand live births. This is very close to the National Infant Mortality Rate of 18 per thousand (see Table 1). The causes of death of these children are shown in the table. Again the most common cause of death has been prematurity. Probably the only useful step we could take to reduce this waste of infant life would be for expectant mothers to rest from the 30th week of pregnancy until delivery. This, of course, does not necessarily mean giving up work. A housewife with young children may well find an office job more restful than her home.

**TABLE 4**  
**INFANT MORTALITY IN 1968**  
Deaths from stated causes under one year of age

Cause of Death		Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
1. Prematurity	..	14	-	-	-	14	-	-	-	-	14
2. Congenital Abnormalities											
(a) C.N.S.	..	1	-	-	-	1	2	1	-	1	5
(b) C.V.S.	..	1	-	1	-	2	3	1	-	-	6
(c) Other	..	3	-	-	-	3	-	-	-	-	3
3. Infection											
(a) Respiratory tract		-	-	-	-	-	3	1	-	-	4
(b) Alimentary tract		-	-	-	-	-	-	1	1	-	2
(c) Other	..	-	-	-	-	-	-	-	-	-	-
4. Haemorrhage	..	3	-	-	-	3	-	-	-	-	3
5. Asphyxia											
(a) Neonatorum	..	3	-	-	-	3	-	-	-	-	3
(b) Inhalation of vomit		-	-	-	-	-	-	-	1	-	1
		25	-	1	-	26	8	4	2	1	41

### Infectious Diseases

There were again very few deaths from infectious diseases during the year (Table 3). The notifications of infectious diseases are shown in Table 5. During the year there was a change in the notifiable diseases, Pneumonia becoming no longer notifiable and Infectious Hepatitis becoming notifiable for the first time. It is sad to relate that one of the reasons for making this latter disease notifiable was an attempt to control the illegal self-administration by injection of 'hard drugs.' I am happy to say that there is no suggestion that any of the cases of Infectious Hepatitis recorded in Table 5 were due to this cause.



TABLE 5  
INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1968

	DISEASE	Total all ages 1966	Total all ages 1967	Total all ages 1968	Under 1 year	1—4 years	5—14 years	15—45 years	46—64 years	Over 65 years	Age unknown	Cases admitted to hospital
GARFORTH U.D.	Scarlet Fever ..	33	32	10	—	4	5	1	—	—	—	—
	Pneumonia ..	1	—	2	—	—	—	2	—	—	—	—
	Meningococcal Infection ..	—	1	—	—	—	—	—	—	—	—	—
	Whooping Cough ..	6	18	13	1	11	1	—	—	—	—	—
	Erysipelas ..	1	—	1	—	—	—	—	—	1	—	—
	Measles ..	158	102	54	3	33	18	—	—	—	—	—
	Sonne Dysentery ..	—	1	—	—	—	—	—	—	—	—	—
	Food Poisoning ..	—	1	3	—	2	1	—	—	—	—	—
ROTHWELL U.D.	Scarlet Fever ..	63	54	24	—	7	17	—	—	—	—	—
	Pneumonia ..	7	19	14	1	1	—	2	3	7	—	—
	Erysipelas ..	7	4	5	—	—	1	2	—	2	—	—
	Whooping Cough ..	17	101	32	2	17	13	—	—	—	—	—
	Measles ..	210	202	141	6	104	31	—	—	—	—	1
	Sonne Dysentery ..	12	9	107	2	23	38	37	5	2	—	—
	Food Poisoning ..	1	1	3	—	—	1	2	—	—	—	—
	Puerperal Pyrexia ..	1	1	—	—	—	—	—	—	—	—	—
	Infective Hepatitis ..	—	—	9	—	1	2	6	—	—	—	—
	Meningococcal Infection ..	—	—	3	—	—	3	—	—	—	—	3
STANLEY U.D.	Scarlet Fever ..	15	13	12	—	7	3	—	—	—	2	—
	Meningococcal Infection ..	—	—	1	—	1	—	—	—	—	—	1
	Erysipelas ..	—	2	—	—	—	—	—	—	—	—	—
	Whooping Cough ..	2	24	1	—	1	—	—	—	—	—	—
	Measles ..	91	114	99	5	65	29	—	—	—	—	—
	Sonne Dysentery ..	—	—	8	1	2	1	3	1	—	—	1
	Infective Hepatitis ..	—	—	5	—	—	4	1	—	—	—	—
TADCASTER R.D.	Scarlet Fever ..	40	27	7	—	4	3	—	—	—	—	—
	Whooping Cough ..	19	51	7	2	3	2	—	—	—	—	—
	Measles ..	200	447	129	7	73	48	—	—	—	1	—
	Sonne Dysentery ..	36	4	3	—	2	1	—	—	—	—	—
	Pneumonia ..	9	9	7	1	1	1	3	—	—	1	—
	Erysipelas ..	1	—	1	—	—	—	—	1	—	—	—
	Infective Hepatitis ..	—	—	15	—	2	7	4	1	1	—	—
WETHERBY R.D.	Scarlet Fever ..	29	17	16	—	2	14	—	—	—	—	—
	Whooping Cough ..	5	22	17	1	10	6	—	—	—	—	—
	Measles ..	196	420	395	14	225	156	—	—	—	—	—
	Sonne Dysentery ..	16	9	24	—	5	10	9	—	—	—	—
	Pneumonia ..	2	1	—	—	—	—	—	—	—	—	—
	Erysipelas ..	—	1	1	—	—	—	1	—	—	—	—
	Infective Hepatitis ..	—	—	1	—	1	—	—	—	—	—	—

It can be no source of pride that almost without fail industrial Yorkshire has the highest incidence of dysentery in the country. There can be no doubt that this is in large measure due to poor personal toilet hygiene.

In the Urban District of Rothwell there were 107 recorded cases, 83 of these occurred in the month of October in one sharp epidemic. Washing of the hands after visiting the toilet, and before preparing or eating food, is the only effective way of preventing the spread of this unpleasant, and sometimes dangerous, illness.

While there are only 6 recorded cases of food poisoning in the district it is sad to record that 1 death occurred in Leeds in a person who had consumed meat products prepared in a factory situated in this area (see preface).

Some common diseases of animals rarely infect human beings. During the year we had evidence of Anthrax and Brucellosis in cattle, Leptospirosis in rats and Psittacosis in birds. Fortunately there were no known cases of human Anthrax or Leptospirosis, but I suspect infection of bird breeders and handlers by Psittacosis and cattle men by Brucellosis is more common than many of them realise.

The figures for notification of Tuberculosis are recorded separately in Tables 6 and 7.

TABLE 6  
TUBERCULOSIS — NEW CASES NOTIFIED DURING 1968

		Garforth U.D.				Rothwell U.D.				Stanley U.D.				Tadcaster R.D.				Wetherby R.D.			
AGE		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
10 - 14 years	..	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15 - 19	..	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20 - 24	..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25 - 34	..	-	1	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
35 - 44	..	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	1	-	-	-	-
45 - 54	..	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
55 - 64	..	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	-	-	-
65 and over	..	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
TOTALS	..	1	1	-	-	3	4	-	-	1	-	-	-	-	1	-	-	2	2	-	-



There were 15 new cases of Pulmonary Tuberculosis during the year, compared with 19 in 1967.

TABLE 7

DISTRICT	PULMONARY		NON-PULMONARY	
	Males	Females	Males	Females
Garforth Urban District	19	18	1	4
Rothwell Urban District	52	28	12	2
Stanley Urban District	5	10	2	1
Tadcaster Rural District	30	19	4	5
Wetherby Rural District	13	16	5	5
	119	91	24	17

The number of cases on the register at the end of the year can be seen in Table 7.

Satisfactory as these figures are we should not become complacent about this disease. In one small village there were four cases on the register in 1963. The following year an inhabitant developed Tuberculous Meningitis. During the next year the village postman died of massive, previously undiagnosed, Pulmonary Tuberculosis. In the year previous to this report another inhabitant was found to have extensive Pulmonary Tuberculosis at postmortem, and yet another case was discovered in the village. In view of this the entire child population of the village was surveyed by the local Health Visitor.

Over 20% (48 of 238 children) of the children were Heaf positive. A Heaf survey of the area in 1966 had shown rather under 5% of children of this age group to be positive. 23 of the children had had B.C.G. as a routine measure and 14 as contacts of a case of Tuberculosis. One of the children had had Tuberculosis in infancy. Of the 9 other positive cases 5 had evidence of a tuberculous infection of the lungs. I am pleased to report that they are now in good health. Many thanks are due to the parents, from whom there was only one refusal, and to the Health Visitor who completed this valuable piece of work single-handed.

It is a sad commentary on human behaviour that nationally Gonorrhoea is now the second most common infectious disease, only exceeded by measles. There can be no doubt that within the next year or so when the effects of measles immunisation are felt, that the sexually transmitted diseases will, for the first time in the history of this island, be the most common infectious diseases. These diseases are not recorded in Table 5 because they are not notifiable. However, during the year 56 males and 24 females from the Rural Districts of the Division attending the special Venereal Disease Clinic, and 93 males and 99 females from the Urban Districts were found to have an infection.

My staff, who are in daily contact with our young people, have the impression that sexual experience in teenage is becoming ever more common. The latest reliable national figures are already some years out of date, but the Schofield Report covering over 1,800 teenagers, showed that by the age of 16, 14% of boys and 5% of girls had had sexual intercourse.

### **Personal Health Services**

*Care of Mothers and Young Children.* It will be seen from Table 8 that there has been a welcome increase in the percentage of hospital deliveries during the year. However, within the Division there are marked differences between the districts. While 16% of Wetherby mothers have their children at home, 44% of those in Stanley still have home confinements. It is of course less important to ensure that all women are confined in hospital, than that all women who need hospital confinement receive it. I am pleased to record that the great majority of family doctors are now following the admission policies suggested by the Royal College of Obstetricians and the Ministry of Health. There are however, still a few unnecessary tragedies, one such during the year being a baby of a Rhesus Negative mother who was severely affected due to rhesus incompatibility. With closer co-operation between hospital, family doctor, Local Authority and mother, this could never have happened.

Domiciliary midwives continue to be very hard worked, in the Garforth area in particular, where 40% of the 543 births took place in the patient's home.

Health Visitors visited 10,025 children under the age of 5 during the year. Towards the end of the year some of them were already taking their own clinics and giving immunisation in them, without the attendance of a doctor. They have of course been responsible for certain screening tests (deaf testing and phenylketonuria) for some years. Plans for regular developmental screening by Health Visitors were completed during the year ready for operation on the 1st January, 1969.

Case Conferences continued to be a most useful method of liaison with other voluntary and statutory bodies concerned with the care of mothers and children. The Co-ordinating Committee was not called during the year but three extremely well attended luncheon groups, open to all working in this field, were held at Garforth Clinic. It is hoped they will continue in future years.

During the year there was continued expansion of play-groups, of which 27 were known to be in the Division at the end of the year. There were 6 registered child minders.



TABLE 8

	Domiciliary Deliveries		Hospital Deliveries		Percentage of Domiciliary Deliveries	
	1967	1968	1967	1968	1967	1968
Garforth Urban District	203	217	315	324	39.2	40.1
Rothwell Urban District	155	96	278	328	35.8	22.6
Stanley Urban District	199	153	197	192	51.2	44.3
Tadcaster Rural District	170	160	431	458	28.3	26.0
Wetherby Rural District	96	68	343	350	21.9	16.3
	823	694	1564	1652	34.5	29.6

*Care of the School Child.* Following a policy of totally selective medical examinations introduced in 1967, 3,655 pupils received full medical examinations, as compared with 5,034 in the previous year. It is felt that by selection of cases and reduction of the quantity of our service, we can improve its quality.

Of the 43,026 examinations undertaken by school nurses, 145 children were found to be infested. While this is a reduction of 259 from the previous year, examining staff have found isolated areas within the Division where infestation is common even among the pre-school children. This problem is by no means solved. Visual defects were found in 1,100 children, 582 of whom had spectacles prescribed. The hearing of 2,213 children was tested, of whom 58 were referred for further special tests. 37 children were known to be in school with hearing aids — 27 of these being at Bridge House School for the Deaf.

It is slowly being appreciated that emotional upsets can impede learning as much as physical or mental handicap. The team at the Child Guidance Clinic saw 173 children (an increase of 27) during the year.

*Care of the Mentally Subnormal and Mentally Ill.* The four Mental Welfare Officers and two Senior Mental Welfare Officers who work within the Division have continued to be fully occupied. Cases are mainly referred from hospitals, Consultant Psychiatrists and family doctors. There are a few self referrals and members of the public are urged to get in touch with these officers if they have serious doubts about their own mental stability or those of their friends. The eight suicides which took place during the year might have been saved if skilled help had been available. It should always be remembered that those who threaten suicide, often commit suicide, despite the widely held belief to the contrary.

*Care of the Aged.* While the home help and home nurse give help wherever it is needed, the great proportion of their time is spent in caring for the aged. Of the 67,331 home nurse visits (62,300 in 1967), 40,321 (39,377 in 1967), were paid to the aged. Our 263 home helps worked a total of 147,067 hours. Chiropody and pads for the incontinent were services which continued to be widely used and much appreciated.

### Prevention of Disease

*Health Education.* The Health Visitors and Midwives have continued to give much Health Education. We have tried to emphasise in the Division that good ante-natal care is not solely preparation for confinement but preparation for parenthood. The former lasts hours only, the latter at least 20 years. Youth Clubs, Wives Groups, other local organisations and of course, schools, have received advice on many subjects. There has been a noticeable increase in interest in the problems of drug taking and sexual behaviour but the public does not seem to be greatly interested in food hygiene, nutrition or the dangers of smoking and obesity. The unnecessary and preventable dental caries experienced by the children in the Division has apparently been of even less concern to those who are in a position to take the important step of fluoridation of the public water on their behalf.

*Vaccination and Immunisation.* For many years we have been able to protect our children against polio, tetanus, diphtheria, whooping cough, smallpox and tuberculosis by these measures. During the year measles was added to this list as vaccine became available for priority groups. It is to be expected that measles will become uncommon within five years and if the campaign is pushed energetically, we can hope for total eradication within 10 years. The number of children immunised can be seen from Tables 9, 10 and 11. There has been a considerable drop in the number of primary immunisations undertaken during the year, but this has been due to a change in County policy in that immunisation is now started when the baby is six months of age and not three months as previously. The computer situated at County Headquarters, Wakefield, is now responsible for sending the invitations to parents for their child to receive immunisation, whether it be from the family doctor or the Local Authority Clinic. Only 755 children received smallpox vaccine during the year, compared with 2,028 in 1967. Whilst smallpox vaccination must continue to be of great importance in the general population around our sea and air ports and in centres of immigration, it is at least arguable whether we should continue to advocate this as a routine procedure to our parents.



# VACCINATION AND IMMUNISATION

TABLE 9

Primary Immunisation Course	Children born in Year :—					Total
	1968	1967	1966	1965	Pre-1965	
Poliomyelitis	470	628	48	17	129	1292
Diphtheria	472	726	37	14	111	1360
Pertussis	472	724	33	13	17	1259
Tetanus	472	726	37	14	146	1395

TABLE 10

Re-inforcing Doses	Children born in Year :—					Total
	1968	1967	1966	1965	Pre-1965	
Poliomyelitis	—	228	424	47	2552	3251
Diphtheria	—	222	507	54	2506	3289
Pertussis	—	212	452	27	81	772
Tetanus	—	222	507	56	2531	3316

## SMALLPOX VACCINATION

TABLE 11

Age at date of vaccination	Number of persons vaccinated (or re-vaccinated during year)	
	Number Vaccinated	Number Re-vaccinated
0—3 months	2	—
3—6 „	6	—
6—9 „	3	—
9—12 „	8	—
1 year	509	—
2—4 years	186	6
5—14 „	41	36
TOTAL	755	42

Protection against T.B. is given by B.C.G. and 841 school-children were vaccinated during the year, in addition to 66 children who were contacts of known cases.



*Early Detection of Disease.* Whilst all are agreed that "a stitch in time saves nine," the application of this principle to the pre-symptomatic detection of disease has not been as easy as was at first hoped. Cervical Cytology has been much publicised to detect early cancer of the womb. There can be no doubt if this procedure was undertaken regularly for all women at risk, many lives would be saved. However, the efficiency in practice of this procedure is now in some doubt. It is imperative that the medical profession does not make promises to the public which it cannot fulfil.

Similarly your Medical Officer is not convinced of the wisdom of screening for phenylketonuria. Plainly any measure designed to reduce human suffering must be considered on humanitarian as well as cost benefit grounds. While it is arguable that a mass phenylketonuria screening programme may save the cost of a lifetime in an institution for the mentally defective, some parents whose children have phenylketonuria have been so upset at the necessity to stick to a strict and unpalatable diet, that the family unit has been seriously threatened by this medical interference.

During the year there was public interest in the possibility of determining the presence of certain congenital abnormalities in babies before birth. Examination of the "water" in which the baby lies in the uterus can disclose abnormalities of the foetal chromosomes. It has been suggested that mongols detected in this way might be aborted. Horrified as I am at present public attitudes to the legislation of murder of babies in utero, I am forced to the conclusion that for the sake of these very babies abortion might be the correct line of action in some cases. It is sad to record that rejection of these children, often by middle class parents, seems to be on the increase. It appears that parents do not realise that one in 40 children are born with a serious abnormality and that this is one of the responsibilities and risks one takes when embarking upon parenthood. If our parents continue to feel that they have the right to repudiate their offspring if they are not to their entire satisfaction, I will with sorrow join the ranks of those who advocate a freer use of abortion.

# ENVIRONMENTAL HEALTH SERVICES, 1968

## SANITARY INSPECTION OF AREA

							1968
<b>Infectious Disease Prevention</b>							
Inspections	...	...	...	...	...	...	6
Disinfections	...	...	...	...	...	...	0
<b>Milk and Dairies</b>							
Inspection of Dairies							
(Under the jurisdiction of W.R.C.C.)	...	...	...	...	...	...	0
<b>Food and Drugs Inspection</b>							
Meat Inspection	...	...	...	...	...	...	8
Food Inspection	...	...	...	...	...	...	24
Water Sampling	...	...	...	...	...	...	8
<b>Housing</b>							
Houses inspected and recorded	...	...	...	...	...	...	646
General Surveys	...	...	...	...	...	...	1,643
Public Health Act Inspections	...	...	...	...	...	...	940
Re-visits	...	...	...	...	...	...	343
<b>Offensive Trades</b>							
Inspection of Fat Refining Premises	...	...	...	...	...	...	9
<b>Sanitary Matters</b>							
Inspections for Verminous Premises	...	...	...	...	...	...	5
Inspections for Rat Infestations	...	...	...	...	...	...	727
Inspection of Drainage complaints and repair*	...	...	...	...	...	...	384
Clean Air Act	...	...	...	...	...	...	839
Inspection re refuse removal and disposal	...	...	...	...	...	...	260
Factories and Workshops	...	...	...	...	...	...	20
Caravans	...	...	...	...	...	...	45
Number of Statutory Notices							
(Housing and Public Health Acts)	...	...	...	...	...	...	19
Number of Nuisances abated on serving							
Statutory Notices (Public Health Acts)	...	...	...	...	...	...	23

\*New Drainage now inspected by Building Inspector.

ANNUAL REPORT  
of the  
PUBLIC HEALTH INSPECTOR  
and  
CLEANSING SUPERINTENDENT  
for the year  
1968

*To:— The Chairman and Members of the  
Rothwell Urban District Council.*

Ladies & Gentlemen,

I submit for your consideration my Annual Report for the year 1968 and comment on each particular phase of our work under its own heading.

### Housing

Confirmation of Orders from the Ministry came during the year for dealing with the second phase of our 'back-to-backs' programme at Stourton along with two or three other small groups of houses in other parts of the area. This now means that the Clearance programme has been virtually completed and only very small groups or individual houses in the future will be dealt with.

No. of houses included in Representations made during the year:—

(a) In Clearance Areas	...	...	23
(b) Individual unfit houses	...	...	7

Houses demolished during the year.

In or adjoining Clearance Areas unfit for human habitation	...	48
---	-----	----

Not in or adjoining Clearance Areas as a result of formal or informal procedure under Section 16 or 17 (1) Housing Act, 1957	...	...	17
---	-----	-----	----

Number of persons displaced during the year.

From houses to be demolished in or adjoining Clearance Areas	...	...	...	...	...	152
---	-----	-----	-----	-----	-----	-----

From houses to be demolished not in or adjoining Clearance Areas	...	...	...	...	22
---	-----	-----	-----	-----	----

Number of families displaced during year.

From houses to be demolished in or adjoining Clearance Areas	...	...	...	...	...	77
---	-----	-----	-----	-----	-----	----



From houses to be demolished not in or adjoining Clearance Areas	...	...	...	...	11
Unfit houses made fit.					
After informal action by local authority	...				28
After formal notice under Sections 9 and 16 of Housing Act, 1957	...	...	...	...	13
After formal notice under Public Health Acts	...				6
Houses in which defects were remedied (other than unfit houses made fit) after formal notice under Public Health Acts	...	...	...	...	12
Number of families rehoused during the year into Council owned dwellings.					
(a) Clearance Areas, etc.	...				88
(b) Overcrowding	...	...	...		13
New Dwellings:					
By Local Authority	...	...			20
By Private Enterprise	...	...			390
Grants for conversion or improvement of housing accommodation:					
Formal applications received.	Applications approved during year.	No. of Dwellings completed during year.			
53	53	59			

The Council has suspended its house purchase loans scheme due to the credit squeeze and this is reflected in the reduced number of applications for Improvement Grant schemes.

### Clean Air and Clean Air Zones

During the year a further Smoke Control Area was submitted, being No. 13 (Oulton and Woodlesford) covering 940 acres and totalling 1,582 premises.

The No. 12 (South Ward) area was confirmed by the Ministry during the year, covering 819.95 acres and totalling 384 premises. The operative date is the 1st September, 1969.

The total number of Smoke Control Areas now in operation is eleven covering 2,585 acres and totalling 4,183 premises.

On the industrial side, all plans submitted are examined and discussions held to provide the most efficient type of fuel and plant. Interviews are carried out with all firms emitting smoke, with a view to improving plant and fuel.

### Factories and Workshops

20 visits were made to factories and workshops in the district and the premises generally found to be satisfactory.

One complaint relating to unsuitable sanitary conveniences was rectified during the year. The number of premises on the register at the end of the year was 83. The number of out-workers notified residing and operating within the district is one, and an inspection carried out showed the premises as being to standard.

### **Offices, Shops & Railway Premises Act, 1963**

At the end of the year there were 81 premises employing 367 persons registered with the Council under the Offices, Shops & Railway Premises Act, 1963. One new premise was registered during the year. During the year 13 inspections were made of these premises and defects and deficiencies noted where applicable. During the period no accidents were reported as required by the Act.

### **Public Conveniences**

We still suffer from vandalism and this seems to be particularly local in type and distribution. At one we get a spate of obscene drawings and rhymes and in another, damage to lights and fittings, but we are never absolutely clear of some sort of misuse nor does it seem possible to catch the persons responsible.

### **Public Mortuary**

The one mortuary we have at the rear of the Civic Buildings has been in service throughout the whole of the year without any undue trouble.

### **Prevention of Damage by Pests Act**

During the year 727 inspections were made relating to the investigation and treatment where necessary of all complaints. 166 premises were treater for rats and 41 for mice.

We do receive at the office from time to time, reports about the presence of and damage caused by rabbits but these are now passed on to the Ministry of Agriculture, Fisheries and Food who are empowered to deal with the problem.

### **Nuisances**

The fouling of footpaths by dogs still occasions complaints and so far it has only been necessary to warn the people concerned.

We still receive complaints alleging nuisance from a works and reasonable suggestions and alterations are put in hand by the management immediately. Complaints of mosquitoes from the Woodlesford area resulted in further investigation and arrangements being made with the industry concerned for



treatment of stagnant and swampy areas of land being sprayed by a specialist firm to keep the mosquito population to a minimum.

### **Incidental Activities**

Two Riding Establishments are registered under the Riding Establishments Act, 1946, and also one Animal Boarding Kennel registered under the Animal Boarding Establishments Act, 1933.

Five persons are registered under the Scrap Metal Dealers' Act, 1964 and whilst this registration appears to be only for record purposes, it does provide a means of checking the growth of eyesore scrap yards and making sure that proper planning permission is applied for and granted.

Before the County Council will issue a licence to sell game the applicant must produce a certificate from the local authority saying that his premises are registered and again in one instance we performed this function.

### **Public Cleansing**

The two new 50 cu. yd. dustless loading, self-packing machines, were inaugurated into the service during the year along with the expansion of the plastic bin liner scheme, to cover the whole district. The results have justified the Council taking this step from both a hygienic and efficient method, in reducing the time and cycle of emptying period.

The composition of refuse continues to become more bulky than in previous years and with the popularity of central heating more and more bulky articles which were previously burned are now disposed of by way of the dustbin with additional bins in order to cope with the weekly refuse.

By arrangement we will also arrange to collect and dispose of bulky household furniture, free of charge, and this, I think, is reflected generally in the absence particularly in this district of discarded furniture in the hedgerows and local beauty spots.

The repair shop which, with the garage attached, is under control of this Department, continues to repair all vehicles and items of plant belonging to the Council, and these are kept on the road with the minimum of delay or difficulty due to the efforts of our two mechanics.

### **Sewers and Drains**

The position with regard to domestic drainage is broadly the same, we deal with complaints and clear most of the stop-pages by direct labour and at a rate charge. The relaying of the sewer at the rear of Summerhill Road, Methley, which had been affected by mining subsidence, was completed during the year, also the National Coal Board approved the installation of

a temporary pump at Lower Mickletown where mining subsidence had altered the gradients of the sewer.

### **Food and Drugs**

No slaughtering is carried on in the District and the local retailers purchase their meat from wholesalers in Leeds and Castleford. Periodic inspections have, however, been made of meat and other foods at local shops. The following gives the amount of food condemned as being unfit for human consumption :—

Various Tinned foods	...	...	2,093 lbs.
Frozen Foods	...	...	66 lbs.

The standard of hygiene in food shops in the area has been maintained at a high level throughout the year due to the fact that most of them are under personal supervision of the owners. This ensures that when inspections reveal any falling off in standards direct contact can be made at the time of inspection with someone directly responsible.

Below is a list of premises subject to the Food Hygiene (General) Regulations, 1960:—

Catering establishments	...	23
Bakehouses	...	4
Other Food shops	...	151

Number of Food premises registered under Section 16 of the Food & Drugs Act, 1955:—

Icecream Retailers	...	64
Sausages, Potted or Preserved foods	...	34

During the latter part of the year we were informed of the proposed setting up of a Container Base at Stourton, which is a packing and unpacking station provided with Customs facilities and would be operated by Overseas Containers Ltd., and Associated Container Transportation. These are through transport operators controlling the movement of containers from within Great Britain to a sea terminal at Tilbury and thence, in their own vessels to Australia and vice versa. Further details of the operational side of the container base will be the subject of next year's report.

### **Food Hawkers**

Vehicles are inspected from time to time under the Market Stalls and Delivery Vehicle Regulations, 1966, and during the year all offences were dealt with informally.

### **Water Supply**

During the course of the year we received no serious complaints regarding the quality of the supply, which is under the direct control of Leeds Corporation.



## Statistical Record

For your further information I give below details of our work set out in statistical form and do assure you that these figures do, as far as possible, show the actual amount of work we have done, divided and classified under the special headings.

### Visits and Inspections

Caravans	...	...	...	...	...	...	45
Clean Air Act	...	...	...	...	...	...	839
Demolition of houses and buildings	...	...	...	...	...	...	291
Factories and Workshops	...	...	...	...	...	...	20
Food Examination	...	...	...	...	...	...	32
Food Premises	...	...	...	...	...	...	82
Hairdressers & Barbers	...	...	...	...	...	...	12
Housing Acts	...	...	...	...	...	...	646
Housing Acts (Reinspections)	...	...	...	...	...	...	997
Noise Abatement	...	...	...	...	...	...	82
Offensive Trades	...	...	...	...	...	...	9
Offices, Shops & Railway Premises	...	...	...	...	...	...	23
Petroleum Storage	...	...	...	...	...	...	87
Plant Maintenance	...	...	...	...	...	...	169
Prevention of Damage by Pests Act	...	...	...	...	...	...	727
Public Cleansing Service	...	...	...	...	...	...	260
Public Conveniences	...	...	...	...	...	...	216
Public Health Acts	...	...	...	...	...	...	940
Public Health Acts (Reinspections)	...	...	...	...	...	...	343
Sewers & Drains	...	...	...	...	...	...	384
Water Sampling	...	...	...	...	...	...	8
Miscellaneous	...	...	...	...	...	...	547
							6,719

### Summary of Works carried out

Ceilings repaired or replastered	...	...	...	7
Walls repaired or replastered	...	...	...	28
Windows repaired or renewed	...	...	...	33
Fireplaces repaired or renewed	...	...	...	10
Floors repaired or renewed	...	...	...	8
Doors repaired or renewed	...	...	...	16
Sinks renewed	...	...	...	1
Sink Waste Pipes repaired or renewed	...	...	...	9
Stairs repaired or renewed	...	...	...	1
Roofs repaired	...	...	...	26
Chimney Stacks repaired	...	...	...	22



Eaves gutters repaired or renewed	...	...	...	29
Rainwater pipes repaired or renewed	...	...	...	13
Walls repaired or repointed	...	...	...	14
Drains cleared from obstruction	...	...	...	499
Drains repaired or renewed	...	...	...	15
Water Closets repaired	...	...	...	24
Dustbins provided or renewed	...	...	...	271

### Staff

Due to the death of Mr. T. Wilson, the department was below establishment for five months until Mr. Alan Furness was appointed on the 1st April. I would express my thanks to all members of the staff for the way they have carried out their multitudinous duties which fall to their lot and for their whole-hearted co-operation.

To the Senior Officials of the Council, in particular the Medical Officer of Health and the Clerk of the Council, I tender my thanks for their help and advice.

I am, Mr. Chairman and Members,

Your obedient servant,

G. F. IDLE,

*Public Health Inspector.*









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